1: Messing E-5 (1953-1954)1957 MP5 Amhara MP5

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262 For the less well-to-do, the cheapest meat is chicken, and this red pepper stew is called "qëy doro wät". Slaughtering, even of chicken, must be done by men. The pious pronounce the invocation, "In the name of the Father, the Son, the Holy Ghost, one Divinity"(because of the Monophysite faith). Then the housewife takes over, removes the feathers in boiling water, singes the skin, inflates the outer skin by blowing into the cut skin near the throat. She then cleans the chicken and rubs it with pea flour. Inner organs and wings and legs are washed with salt and lemon juice, then lightly roasted. In another pan, minced red onion, red pepper and other spices are fired in butter, water is added and stirred, ground salt is powdered over it. Then boiled, shelled eggs are added. Now all chicken parts are boiled with this prepared mixture, in a deeper clay pot.

Whenever any of these vegetable or meat stews is boiled without red pepper, the stew is called "alecha", and, unless this dish is added to the menu for variety, it [758] is considered a poor substitute. It is given to very young infants and to persons with intestinal ailments, and so [574] constitutes a symbol for weakness. (It is a major insult to call a man "alecha", because the term also means "impotent".)

Most often alecha is boiled with chicken, "yadoro alecha". Red onion is preferred in butter, in a clay pot ("dest"). Peeled vegetables such as tomatoes (in urban areas) and water are added. The chicken, disjointed, washed and dried, is boiled in this. Powdered ginger, cloves, green pepper without seeds, sweet basil are added,

and observes the travelling traders, the "mängadänna". Both chiefs, especially the danya, sit under broad, shady trees on the market. Nearby is the gibbet, from which criminals were publicly hung until less than a decade ago. Recent additions to the market scene include a few modern tables and chairs at which treasury clerks from Addis Ababa receive import and other duties; and, within a barbed wire fence, government "dressers" of the health department from time to time, especially in epidemics, give free typhus and other injections to anyone applying and diagnosed sick.

Trade practices of the Amhara differ from much of the Middle East, especially from the Arab, The Amhara is too proud to badger a customer, and the profit motive is not as storng--he is not concerned with financial gain. The Amhara is not concerned at monetary loss in a trade transaction but his temper is aroused if he fears that he has been bettered, outwitted and made the laughing stock of others. If he has sold to a foreigner at only a little above the usual price instead of double or triple, his competitors at the market will jeer at him. In this case he will try to undo the trade, claiming linguistic misunderstanding.

As a result of this fear of being shamed, producers of native articles will not bring manufactured goods to market unless they have a previous firm order, after which the customer has to wait. It is craftsman's trade rather than commercial. This is even true of members of ethnic low-class producers, tanners, saddlemakers, smiths,

000 The patient would recover anyway in due course.

758 The therapeutic value of convalescense ("gäzzam ala") is recognized, and patients are told to bask in the sunshine.

562 Men are more likely to let themselves be treated by the "woggesha";
756 women, who suffer more frequently from functional ailments, approach
757 the "dabtara" or "zar" doctor more often and request magical aid.

844 When birth approaches, the midwife is called, almost never the woggesha. If he is, he may not touch the genital parts of the woman, and merely advises the midwife. When labor pains begin, the patient is given a drink of mashed linseed to "relax the birth tract" and to "lessen the pain". The newborn baby is annointed with butter (often rancid), and fed some of it.

759 Other medical helpers, apprentices, or modern "dressers" may be referred to as "healers" ("fawash"), "bala mädanit" (lit. medicine man, who knows empirical drugs and cures), "caretaker" ("astabaqi"), male nurse ("mogzit"), modern "dresser" ("astamami"). None of these are respected professions, for they are regarded as too close to manual labor, and such practitioners usually go to other provinces where their work will not shame the family. In recent years, the more skilled ones have been coming from Eritrea.

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757 Modern change has been largely indirect and partial. The new laws still permit the "woggesha" to function. Penicillin and other antibiotics can be purchased without a prescription at the big "Saturday markets", for as little as ETh$2.50 (US$1.-), and the patient simply buys it, takes it to a "dresser" in the nearest town, whom he pays 1/2 dollar Ethiopian (US 20 cents), to give the injection. When symptoms disappear, e.g. in syphilis, he believes himself cured.

X 794 756 repression and penalty, for no layman can know whether or not it is the spirit who speaks through the doctor in any given situation.

X 794 164 The most frequent types of mental afflictions which the "zar" doctor is called upon to treat are forms of hysteria (mostly in women), catatonic states (also mostly in women), and violent forms of possession including epileptic states (mostly in men). But he also treats some functional ailments, notably rheumatism, which is believed to have been caused by a "lazy zar" who wants his "horse" to stay in one place.

X 794 776 753 Though every person is considered a potential "horse" for a zar, certain personality types are considered particularly vulnerable to possession by evil zars: persons with sad, returing, melancholic natures; women who feel unloved and neglected by their husbands and thus offer little resistance to a male "zar lover"; persons who wish to escape, e.g. chronic drunkards.

X 794 753 758 Apathy, leading to catatonic states if not treated, indicates incipient possession by an evil zar. The patient, often a woman, withdraws into a corner, sits there huddled up, refuses to accept food. Until a zar doctor can be persuaded to come and take on the case, family and friends try to give the patient first aid. For, if she were to remain long in this state, it is believed that her "zar" could "ride" her to death. Therefore, relatives and neighbors come quickly, sing to the patient, entertain her, promise her whatever her heart desires, and generally try to create a merry atmosphere. Finally they try to lure the patient into watching them dance, and try to raise the patient playfully, so as to join them. The patient is never left alone until the doctor comes.

11:Levine Z-4,5 (1958-1961)1965 MP5 Amhara MP5

to cheat the locals. The health officer in charge of the team then brought some of the objectors to the mobile laboratory, patiently explained what was going on, and how it would benefit the people. Before long word got around that these outsiders were not so evil after all, and the doors of Dajan opened.

Given the possibility that the Amhara peasant may come to acknowledge the public health worker as a legitimate agent of change, what about the discrepancy between the ideas advanced by the public health workers and the ideas of his traditional culture? The conception of the causation of illness is radically different in the two cultures. Since the peasant views the etiology of disease as a function of the will of supernatural beings, on what grounds could he adhere to prophylactic measures based on naturalistic conceptions?

Valid though our characterization of the peasant's concept of causation may be, it is nevertheless a very simplified one. It is unlikely that any world view is totally devoid of some sort of naturalistic explanations, just as, conversely, well-educated moderns often cling to residues of "superstition." Though the Amhara's general framework for understanding causation is not naturalistic, he does possess a number of specific notions which can be interpreted as naturalistic or protonaturalistic. Here are some examples:

(1) The belief that an excessively dirty house brings sickness (even though in practice animals are permitted to urinate and defecate indoors and strings of soot to hang from the rafters).

(2) A vague notion that the daily washing of hands, mouth, and feet is related to health.

(3) The concept of *mietch*, an ailment involving fever and pains, believed to come from exposure to dirty places as well as excessive exposure to the sun (though the devil is often thought to be the conveyer of the ailment).

(4) The concept of *gershâ*, a notion that a convalescent is liable to relapse unless he refrains from eating unaccustomed foods, resumes work slowly, stays out of the sun, and washes his body and clothes.

(5) A latent concept of contagion, found in: (a) the belief that smelling the urine of another will give one a cold, (b) the belief that the breath of a typhus patient will communicate his disease, and (c) the custom of referring to all diseases which can be given by one person to another as "*sâr* sickness."

Even when the explanations set forth by the health workers deviate too much from what the peasant can possibly conceive as plausible, there may still be grounds to justify his accepting some strange advice through an appeal to more familiar beliefs and interests less directly related to the matter at hand. Thus, while peasants have been reluctant to accept the sanitarian's argument that diseases will be prevented by sanitizing the water supply through building wells, they have often been persuaded to build wells by the prospect of securing a more convenient source of water.

Measuring the relative strength of forces supporting and opposing change

*759 without the assistance of another practitioner is him-
762 self identifiable as a kusil herbalist (yikusil med-
haniyt awakiy), a non-wogeyša professional identity.

752 While the splint is worn, the sickman is directed
262 to eat quantities of a restorative (atmit); for frac-
*[192] ture, this consists of fatty meats, which are believed conducive to the mending of bones. After the splint has been removed, the affected region is regularly massaged with the unguent compound which had been used during diagnosis and therapy. The massage aims to restore normal flexibility to the affected body part. Some therapists continue the atmit regimen during this period and even beyond it.

*759 Alone among Amhara secular practitioners, the
752 tagañ practices a therapy which immobilizes the sickman for an extended period. During recuperation, therapeutic massages must continue, and the instability of the sickman's jimat preclude his moving about. When a tagañ is famous for difficult therapies, such as breaking and resetting improperly set bones or treating paralyzed limbs, he attracts sickmen from great dis-
[758] tances. Since these sickmen cannot leave the tagañ until pronounced cured, they require access to local accomodations and the assistance of a relative or servant to prepare their meals and tend to other personal

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needs.[1]

+ 759 The wogeysa's remaining therapies---excision of
+ 753 tonsils (ankar) and teeth---are characterized by simpler
752 diagnosis and treatment than are the tagañ's works.
[813] Swollen and inflamed tonsils (komshaw) may be caused by
* [192] gerifta; in infants, however, the condition may be congenital, brought on by the over-exertions of the child's mother during pregnancy. It is considered a potentially mortal affliction, since the sickman is unable to swallow and loses weight rapidly; eventually the organ bursts and death follows. Tonsils are excised with the assistance of a reed through which a loop of horse
[413] hair has been slipped. With this, the offending organ
[197] is held fast, and excised by whatever type of blade the therapist regards as most efficacious (e.g., a razor, imported 'Arab' knife, or fragment of glass).[2] Kusil

[1]During 1966, the foremost tagañ of Begemder had the following sickmen living simultaneously in three huts which he had erected on his fields; 1) a woman from Woggera (see map 1), with a fractured clavicle, assisted by her daughter; 2) a four year old boy, with a shoulder injury, accompanied by both parents; 3) a woman with a broken fore-arm, from Belsea, assisted by a locally acquired servant; 4) a woman from Tigre, with an immobile right arm, assisted by a locally acquired servant.

[2]In the Gondar area, both tonsils and uvula are classified as 'ankar'. Elsewhere in Begemder, they are often distinguished as 'ankar' and 'intil'. Therapeutically, diseased tonsils and uvula are treated the same, and a wogeysa capable of treating one invariably treats the other.

12:Young E-4,5 (1966) 1971 MP5 Amhara MP5
Begemder

*278 *767 time of day during which the sickman is expected to consume the medicaments (often on rising, or before going to bed), the relevant numerological details (e.g., the medicaments are to be eaten seven times daily for seven *[192] days), and the manner of application. Therapies may establish that medicaments be consumed in a unitary form (e.g., eaten together with injera bread), in multiple forms (e.g., eaten with bread, drunk with talla beer, and washed with as with a lotion) and, if in multiple forms, whether applied at the same or different therapeutic sessions.[5]

• 758 Therapies also designate regimens to be followed once the pathogenic substance has been successfully removed [833] from the sickman. Frequently, regimens for convalescence *[192] following serious (koboda) ailments direct the recuperant to rest in some isolated place, away from any populated area, where he will be safe from the shadows of humans, particularly those fresh from coitus. Some regimens require him to sit in a darkened hut, others place him beside the hearth fire, while still others have him rest in

[5]Only therapy for buda possession (see below), requires the application of different, discrete medical preparations at the same therapeutic sessions.

• 758 the sunlight.[6] After the disease symptoms have disappeared, and the convalescent has regained his former vitality, some precautions may still be followed to prevent the return of the original syndrome, to which he may have developed a vulnerability. For example, the former sickman may be forbidden to eat one or more of the foodstuffs which were included among the materia medica of his cure. Often, an amulet containing dried materia medica of the primary medicine is also worn.

*278 Pharmacological Combinations. In the abstract, Amhara pharmacology can be considered as a corpus of discrete and varied instructions for a) conserving the latent healing power of botanicals, and b) converting this power into therapeutically effective agents. Seen from this perspective, Amhara pharmacolog y has the potential for a large number of logically possible combinations of instructions, ranging from those with few directions of any kind, to combinations with elaborate instructions in each pharmacological category. Although, empirically, Amhara herbal therapies probably fall short of the potential number of combinations, the combinations charac-

[757] [834] [6]Primary syphilis, in particular, sets elaborate requirements---the removal of all hair from the body, head, and face; in addition, there is a period of abstinence from coitus.

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through the chirurgeon's massage.

Bleeding is regarded as a fatiguing experience for the client, and must be followed by a rest of two or three days. Bleeding for ras mitat is considered an exception, and no rest is required. However, the sickman is particularly vulnerable to gerifta during recuperation and, so, cannot leave his hut for fear of a relapse.

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The cupper is unique among lay practitioners in several respects. First, he occasionally works under the direction of another category of practitioner, the tagan (wogeyba). Second, there are special physical requirements; the agamiy must have all of his incisors, and the upper and lower teeth must meet in an unbroken plane. Third, the agamiy exposes himself to certain dangers in the performance of this therapy. Because he must remove a pathogenic substance through the medium of the sickman's blood, there is the danger that, should any of the blood enter his own mouth, the agamiy may himself fall ill with the ailment he is treating. In addition, contact with this blood threatens those chronic ailments from which the sickman suffers (such as the rheumatoid pains associated with kitin, syphilis).

The agamiy's cup is a short, hollow bovine horn, whose tip has been removed. Selected leaves, which have been dried and then steeped to make them pliable, are

12:Young E-4,5 (1966) 1971 MP5 Amhara MP5
Begemder

APPENDIX A

FOUR CLIENT NARRATIVES DESCRIBING HERBALIST THERAPIES

NARRATIVE 1

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Taamrat realized that he had contracted ceebt (gonorrhea), for the symptoms were unambiguous: Urination was difficult, he was unable to sit or walk about properly, and he could feel the burning sensation in his bladder caused by the gerifta which had lodged there. Taamrat consulted an herbalist living in an adjacent hamlet, who was known as a yiceebt medhaniyt awakiy by his neighbors. The herbalist prepared an infusion of roots and leaves, and gave this to Taamrat to drink. He also directed the sickman to drink much whey, so that the disease agent could be flushed from his body. The infusion was a strong purgative and diuretic, and the herbalist told the sickman that he could observe in Taamrat's urine the tiny eggs that the gerifta had produced in the bladder. In addition, evidence of blood in the urine also indicated that the disease agent's hold on Tamraat was being loosened. Taamrat was given a single dose of
[758] the infusion, but no memeleša. The therapy greatly fatigued Taamrat, and his wife was instructed to feed him quantities of chicken liver as a restorative (atmit). Taamrat believed that the therapy had severely strained

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it. Bogalec decided to take the boy to a yikoruba med-baniyt seci who lived in a nearby hamlet, who was reputed to be able to recognize koruba. The herbalist, a woman, was consulted within hours of the irruptions, for Bogalec knew that koruba advances rapidly and, after a day's time, is no longer susceptible to treatment. The herbalist examined the irruptions, diagnosed the ailment as koruba, and gave Bogalec a leaf with directions that it be ground, mixed with hydromel (birz) and given to the child in small increments. The infusion was a strong emetic and purge, and, since there was no memeleša, Bogalec had to watch the child carefully lest he be overcome by the therapy. After two applications, Bogalec stopped, for fear that a third would kill the child. The boy was afterwards fed a liver restorative. During his recuperation, Bogalec and her husband took care not to speak the word "koruba" before the boy; in addition, he was given no talla beer. Either action could have induced a fatal relapse.[30] The herbalist asked for and received a fee of E$1., but told Bogalec that the money would be given to the parish church, since she did not intend to profit from her curing.

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[30] A similar injunction is followed for certain other ailments, even where there is no present danger, particularly "kuntina" (leprosy).